MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

| U | 566958

APPLICANT(S)

AFTER
2 MAMENDMENT
IND. DEP.

CLAIMS

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| CLAIMS | | | ググ | | | | | OTAL | | | | 300 | |
| PTO - 136 | 0 (REV 1170A) | | rest// | | | AND SHAPE | Let | AIMS | | DEBARDER | | | |

PTO - 1360 (REV. 11/04)

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